

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W	21534	11-23-99
O.I.P.E. CLASSIFIER		16	11-29-99
FORMALITY REVIEW		204477	12-15-99

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/22/00
2		✓	3/22/00
3		✓	3/22/00
4		✓	3/22/00
5		✓	3/22/00
6		✓	3/22/00
7		✓	3/22/00
8		✓	3/22/00
9		✓	3/22/00
10		✓	3/22/00
11		✓	3/22/00
12		✓	3/22/00
13		✓	3/22/00
14		✓	3/22/00
15		✓	3/22/00
16		✓	3/22/00
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18		✓	3/22/00
19		✓	3/22/00
20		✓	3/22/00
21		✓	3/22/00
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25		✓	3/22/00
26		✓	3/22/00
27		✓	3/22/00
28		✓	3/22/00
29		✓	3/22/00
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47		✓	3/22/00
48		✓	3/22/00
49		✓	3/22/00
50		✓	3/22/00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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